

CHET EDWARDS STATEMENT ON NEW MILITARY HOSPITAL FOR FT. HOOD

(Washington, D.C.) – U.S. Representative Chet Edwards released the following statement announcing that stimulus funds would be used to build a new military hospital at Ft. Hood.

“It is now official. At long last the soldiers and families of Ft. Hood are going to have a new, state of the art hospital that is worthy of their sacrifice for our country. This 21st century hospital will mean fewer trips to San Antonio for soldiers’ medical care and shorter waiting times for doctors’ appointments for our troops and their families. For soldiers with Post Traumatic Stress Disorder, it will mean better care in much improved facilities. The new hospital will help Ft. Hood doctors and nurses provide higher quality care with more efficiency than is possible in the present antiquated and undersized Darnall hospital. The new hospital will also improve services for soldiers transitioning into the VA system and for wounded soldiers in the largest Warrior Transition Unit in the U.S Army. It will make possible an expansion of the DOD-VA health care partnership, which could benefit thousands of veterans throughout Central Texas.

Above all, I hope this commitment of \$621 million to improve the quality of life for our soldiers and their loved ones sends a clear message to every soldier and every Army family that our nation deeply respects their sacrifice and service to the American family.

Let me give you some facts on how the new hospital funding happened and why it was much needed.

The \$621 million for Phase I of the new hospital comes from the \$1.3 billion I added for DOD hospital modernization in the recent federal stimulus bill. The fact is that the Department of Defense has for years underinvested in modernizing its vast hospital system, which resulted in DOD hospitals becoming increasingly outdated. For years DOD hospital modernization has been put on the back burner, which slowly began to compromise care for our service members and their families.

Last year, as Chairman of the House Military Construction Appropriations Subcommittee, I added \$1 billion to the Iraq War Supplemental Appropriations bill to begin the process of at long last bringing our DOD hospitals into the 21st century. With that money, DOD chose to build new hospitals at Ft. Benning, Georgia; Ft. Riley, Kansas and Camp Lejeune, North Carolina.

With the \$1.3 billion I put in the stimulus bill, DOD will build new hospitals at Ft. Hood and at Camp Pendleton, California and will modernize the facilities at the Naval Air Station in Jacksonville, Florida.

I have every intention of continuing my push to modernize the DOD health care system for one simple reason—our troops and their families deserve no less.

Regarding the hospital at Ft. Hood, this has been a long and difficult but worthwhile road. A new hospital has been a high priority for Ft. Hood leaders for the past two decades. When I represented Ft. Hood in Congress, until 2004, I worked closely with former III Corps Commander Tom Metz to put together a public-private partnership to build a new hospital but the federal bureaucracy devoured this new approach. It became obvious to me then that the only way to get a new hospital at Ft. Hood was to fund it directly in the federal military construction budget, and our challenge was that Administrations would not put it in their budgets, even though military medical commanders knew a new hospital was needed.

When Congressman John Carter was first elected to represent Ft. Hood in 2005, he quickly continued the effort to build a new hospital at Ft. Hood. I give him credit for pushing the Army to designate Darnall as an Army Medical Center in 2006.

With my chairmanship of the Military Construction Appropriations Subcommittee and Mr. Carter being a key member of the Subcommittee, he and I have worked closely together over the past four years to see that the need for a new hospital at Ft. Hood would not be forgotten by the Army or the DOD Medical Command.

Here are some background facts on the new Ft. Hood hospital:

1. The \$621 million will fund Phase I of two Phases. Phase I planning has already begun and ground should be broken in September of 2010. It will take approximately three years to complete. 2. Phase I will be 585,000 square feet. Among other things it will include a primary care clinic, a pediatric clinic and new operating rooms. Very importantly, it will take the antiquated behavioral services facilities, currently spread out in three separate locations, including a 40-year-old barracks facility, and consolidate them into one facility. 3. Before Phase II begins, the present Darnall facilities will be used for inpatient, emergency room and mothers' health services. 4. Phase II will be an additional \$350 million for a 362,000 square foot facility. Present plans are to start Phase II in 2016, and I will work closely with Congressman Carter to see that Phase II is funded, and, if possible, funded before 2016. 5. When Phase II is completed, Darnall will be 71% bigger than the current hospital – a total of 947,000 square feet.

Let me give you a few key facts about Darnall Army Medical Center that make it clear why a new hospital is so badly needed.

Darnall serves approximately 55,000 active duty soldiers, and there are 176,451 TRICARE eligible beneficiaries in the Ft. Hood area.

It is one of the busiest medical treatment facilities in the Army. On an average day, the staff at Darnall handles 3,867 out patient visits, 26 surgeries, 31 admissions, 170 Emergency Room visits and fills 5,000 prescriptions.

It is #1 in the nation in Active Duty visits and emergency, obstetrical and soldier readiness processing encounters.

It is 44 years old, 33% undersized and cannot be adequately renovated to meet its mission.

It has a shortage of operating rooms, and the current rooms are 20 to 30 percent undersized.

Its Orthopedic Clinic is 54% undersized to meet patient demand.

Its pediatric clinic, supporting 30,000 military children, is in a temporary building with less than half of the needed exam rooms.

Its pharmacy is located in the basement making it difficult to find and significantly undersized.

These problems force soldiers and their families to seek care elsewhere, and over 15,000 trips are made annually by soldiers and their families for specialty care to medical centers over 150 miles away, including San Antonio. That means time away from family and military training.

Darnall was originally built to serve a population of 17,000 troops. Its last major expansion was completed in 1984, when Darnall supported only 39,000 active-duty personnel.

After decades of hopes and dreams of Ft. Hood leaders, the new, modernized Ft. Hood hospital is about to become a reality. That is great news for the Army heroes that serve and protect our nation every day.”